

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

## UNITED STATES DISTRICT COURT

for the

Western District of Washington



TACOMA Division

FILED

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RECEIVED

AUG 25 2021

CLERK U.S. DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON AT TACOMA  
BY DEPUTY

MANJINDER SINGH BEESLA

Case No. \_\_\_\_\_

(to be filled in by the Clerk's Office)

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

SHERIFF DEPARTMENT  
PIERCE COUNTY  
WASHINGTON STATE

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Jury Trial: (check one) ☐ Yes ☒ No

## COMPLAINT FOR A CIVIL CASE

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	MANJINDER SINGH BEESLA
Street Address	20207 85TH AVENUE CT. E
City and County	SPANAWAY / PIERCE
State and Zip Code	WA- 98387
Telephone Number	253-262-7613
E-mail Address	manbeesla@gmail.com

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

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## Defendant No. 1

Name	SHERIFF DEPARTMENT
Job or Title <i>(if known)</i>	HEAD OF DEPARTMENT
Street Address	930 TACOMA AVE S
City and County	TACOMA / PIERCE
State and Zip Code	WA-98402
Telephone Number	(253)798-7530
E-mail Address <i>(if known)</i>	

## Defendant No. 2

Name	
Job or Title <i>(if known)</i>	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address <i>(if known)</i>	

## Defendant No. 3

Name	
Job or Title <i>(if known)</i>	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address <i>(if known)</i>	

## Defendant No. 4

Name	
Job or Title <i>(if known)</i>	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address <i>(if known)</i>	

**II. Basis for Jurisdiction**

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? *(check all that apply)*



Federal question



Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

**A. If the Basis for Jurisdiction Is a Federal Question**

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

28 U.S.C. 1346-FTCA WRONGFULL ACTIONS.  
NEGLEGENCE AND CARELESS NESS OF 911.

**B. If the Basis for Jurisdiction Is Diversity of Citizenship****1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, *(name)* \_\_\_\_\_, is a citizen of the  
State of *(name)* \_\_\_\_\_.

**b. If the plaintiff is a corporation**

The plaintiff, *(name)* \_\_\_\_\_, is incorporated  
under the laws of the State of *(name)* \_\_\_\_\_,  
and has its principal place of business in the State of *(name)* \_\_\_\_\_.

*(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)*

**2. The Defendant(s)****a. If the defendant is an individual**

The defendant, *(name)* \_\_\_\_\_, is a citizen of  
the State of *(name)* \_\_\_\_\_. Or is a citizen of  
*(foreign nation)* \_\_\_\_\_.

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## b. If the defendant is a corporation

The defendant, (name) \_\_\_\_\_, is incorporated under the laws of the State of (name) \_\_\_\_\_, and has its principal place of business in the State of (name) \_\_\_\_\_.

Or is incorporated under the laws of (foreign nation) \_\_\_\_\_, and has its principal place of business in (name) \_\_\_\_\_.

*(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)*

## 3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because (explain):

**III. Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

SHERIFF FAIL TO PROTECT FROM HARASSMENT OF WORK PLACE AND LIVING PLACE.  
911 NO SHOW UP.DEPORTATION THREAT IN CALLING FOR HELP.MULTIPLE INCIDENTS.  
NEGLECTED COMPLAINS BY AUTHORITIES.

**IV. Relief**

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

RETIREMENT.PSYCHOLOGY STRAINS.MEDICAL CONDITION. LIVING COSTS. \$1.5 MILLION IN CLAIMS.

**V. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

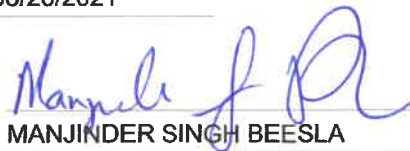
**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 08/20/2021

Signature of Plaintiff

Printed Name of Plaintiff

  
MANJINDER SINGH BEESLA

**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney \_\_\_\_\_

Printed Name of Attorney \_\_\_\_\_

Bar Number \_\_\_\_\_

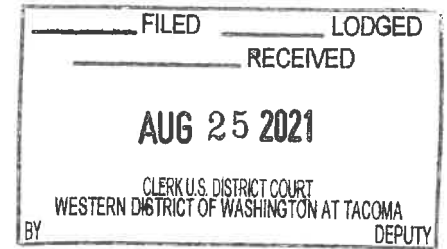
Name of Law Firm \_\_\_\_\_

Street Address \_\_\_\_\_

State and Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_



To

THE HEAD OF SHERIFF DEPARMENT

PIERCE COUNTY, WASHINGTON

930 Tacoma Ave S, Tacoma, WA 98402

SUBJECT- DEMAND LETTER.

RESP SIR/MAM,

MY NAME IS MANJINDER SINGH BEESLA.I AM RESIDENT OF PIERCE COUNTY SINCE 2017.I HAVE CALLED 911 THREE TIMES UP TO 2021.I GOT NO SHOW UP FIRST TIME IN 2018 AS A LIFE THREAT FROM WIFE.

SECOND TIME CALL BY BUMPING NEIGHBOUR INVOLVED IN SOCIAL JUSTICE.HIRE A INVESTIGATOR RESPONSE SECOND TIME IN 2020.

THIRD TIME A HARD TIME GIVEN BY THE CUSTOMER SERVICE OF KEY BANK AS A CONTINUOUS SOCIAL JUSTICE BUMPING GOING ON FROM LAST TEN YEARS.911 OPERATOR JUST SAID BY BY , MEANS, DEPORT FROM USA FOR THIRD TIME IN AUGUST 2021.

I DEMAND JUSTICE CHECK OF 1.5 MILLION IN MY LAW SUIT FOR NOT PERFORMING YOUR DUTY.ADDING TO MY SICKNESS OF PSYCHOLOGICAL STRAINS AND PUSHING ME TO PROVOKE FIGHT.ALSO OUT OF WORK LIKE MEDICAL CONDITIONS.

THANKS.

YOURS OBEDIENTLY,

NAME- MANJINDER SINGH BEESLA

SIGN:

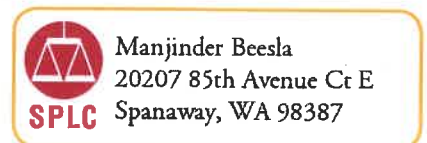
A handwritten signature in blue ink, appearing to read 'Manjinder Singh Beesla', written over a horizontal dashed line.

DATED- 08/20/2021

ADDRESS- 20207 85TH AVENUE. CT. E

SPANAWAY, WA 98387

PHONE-2532627613



Manjinder Beesla  
20207 85th Avenue Ct E  
Spanaway, WA 98387